## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT

CITY - ST - ZIP

SIGNATURE:

appears in Block 12 or Block 13 if changed, or

SIGNATURE AND TYPED OR PRINTE



FLORIDA DEPARTMENT OF STATE

FILED

Apr 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P92000002798 (6)

ADVANCED COMPUTECH CORP.

Principal Place of Business Mailing Address 23381 BOCA CHICA CIRCLE 23381 BOCA CHICA CIRCLE BOCA RATON FL 33433-7295 **BOCA RATON FL 33433** 3a. Date of Last Report 3. Date Incorporated or Qualified 11/06/1992 03/29/1996 2. Principal Place of Business 4. FEI Number Mailing Address 2a. Applied For 65-0364368 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Žip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** SZE, PETER 23381 BOCA CHICA CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 5 greature, typed or prested name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS (96/6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE ☐ Change Addition TOLLE SZE. PETER NAME 12 NAME 23881 BOCA CHICA CIRCLE STREET ADDRESS 13 STREET ADDRESS **BOCA RATON FL 33433** 1.4 CiTY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition SZE, MARY 22 NAME HART 23881 BOCA CHICA CIRCLE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33433** CITY - ST - ZIF 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE MAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY - ST-7IP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-SY-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition THE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the feceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

DIRECTOR

Date